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Bib Data Sheet

CONFIRMATION NO. 9983

SERIAL NUMBER 09/101,723	FILING DATE 08/13/1998 RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. 20066-05
APPLICANTS SHLOMO BEN-HAIM, HAIFA, ISRAEL; NISSIM DARVISH, HAIFA, ISRAEL; MAIER FENSTER, PETA'CH TIKVA, ISRAEL; MIKA YUVAL, HAIFA, ISRAEL;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/IL97/00012 01/08/1997 AND CLAIMS BENEFIT OF 60/009,769 01/11/1996 AND CLAIMS BENEFIT OF 60/011,117 02/05/1996 AND CLAIMS BENEFIT OF 60/026,392 09/16/1996 AND A CON OF 08/595,365 02/01/1996 PAT 5,738,096				
** FOREIGN APPLICATIONS ***** ISRAEL 116699 01/08/1996 ISRAEL 119261 09/17/1996				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 25	TOTAL CLAIMS 58
INDEPENDENT CLAIMS 18				
ADDRESS WILLIAM H DIPPERT COWAN LIEBOWITZ & LATMAN 1133 AVENUE OF THE AMERICAS NEW YORK, NY 100366799				
TITLE CONTROLLING HEART PERFORMANCE USING A NON-EXCITATORY ELECTRIC FIELD				
FILING FEE RECEIVED 1511	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

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 Washington, D.C. 20231

SERIAL NUMBER 09/101,723	FILING DATE 08/13/1998 RULE -	CLASS 607	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. 20066-05
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APPLICANTS
 SHLOMO BEN-HAIM, HAIFA, ISRAEL;
 NISSIM DARVISH, HAIFA, ISRAEL;
 MAIER FENSTER, PETACH TIKVA, ISRAEL;
 MIKA YUVAL, HAIFA, ISRAEL;
**** CONTINUING DATA *******
 THIS APPLICATION IS A 371 OF PCT/IL97/00012 01/08/1997
 AND CLAIMS BENEFIT OF 60/009,769 01/11/1996
 AND CLAIMS BENEFIT OF 60/011,117 02/05/1996
 AND CLAIMS BENEFIT OF 60/026,392 09/16/1996
 AND CLAIMS BENEFIT OF 08/595,365 02/01/1996 PAT 5,738,096
**** FOREIGN APPLICATIONS *******
 ISRAEL 116699 01/08/1996
 ISRAEL 119261 09/17/1996
**** SMALL ENTITY ****

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 25	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 18	
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					
Verified and Acknowledged _____	Examiner's Signature _____	Initials _____			

ADDRESS
 WILLIAM H DIPPERT
 COWAN LIEBOWITZ & LATMAN
 1133 AVENUE OF THE AMERICAS
 NEW YORK, NY 100366799

FILE

CONTROLLING HEART PERFORMANCE USING A NON-EXCITATORY ELECTRIC FIELD

FILING FEE RECEIVED 511	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART U	ATTORNEY DOCKET NO.
09/101,723	08/13/98	607	3737	20066-05

APPLICANT NISSIM DARVISH, HAIFA, ISRAEL; MAIER FENSTER, PETACH TIKVA, ISRAEL; MIKA YUVAL, HAIFA, ISRAEL; SHLOMO BEN-HAIM, HAIFA, ISRAEL.

****CONTINUING DOMESTIC DATA*******

VERIFIED PROVISIONAL APPLICATION NO. 60/009,769 01/11/96
PROVISIONAL APPLICATION NO. 60/011,117 02/05/96
CHZ PROVISIONAL APPLICATION NO. 60/026,392 09/16/96
8/3/99 PROVISIONAL APPLICATION NO. 08/595,365 02/01/96 PAT 5,738,096

****371 (NAT'L STAGE) DATA*******

VERIFIED THIS APPLN IS A 371 OF PCT/IL97/00012 01/08/97

CHZ
8/3/99

****FOREIGN APPLICATIONS*******

VERIFIED ISRAEL 116699 01/08/96
ISRAEL 119261 09/17/96

CHZ 8/3/99

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/12/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEP. CLAIMS
Verified and Acknowledged	<u>CHZ</u> Examiner's Initials	ILX	25	58	18

ADDRESS WILLIAM H DIPPERT
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TITLE ELECTRICAL MUSCLE CONTROLLER

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
1,493		